

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Humanity Forward Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00712497	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			MM / DD / YYYY 01 / 27 / 2020	
Full Name of Payee <b>Card Services Center</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 26 / 2020		
Mailing Address 200 Chastain Center Blvd., #200		Amount 1396.18		
City Kennesaw	State GA	Zip Code 30144	Transaction ID : PDT.E.88	
Purpose of Expenditure Online Ads - CA, FL, TX, OH		Category/ Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 01 / 31 / 2020	
Name of Federal Candidate Yang, Andrew, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		83433.97	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Cohen, Lawrence, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 26 / 2020		
Mailing Address 12006 Hammack Street, Apt. C		Amount 220.08		
City Culver City	State CA	Zip Code 90230	Transaction ID : PDT.E.59	
Purpose of Expenditure Online Ads - CA, FL, TX, OH		Category/ Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 01 / 26 / 2020	
Name of Federal Candidate Yang, Andrew, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		83433.97	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		1616.26		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶				
(c) TOTAL Independent Expenditures..... ▶		1616.26		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Lutz, Kim, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 07 / 18 / 2020